

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		8/19/01
O.I.P.E. CLASSIFIER		48	8/19/01
FORMALITY REVIEW		7057	9/20/01
RESPONSE FORMALITY REVIEW		4	1/17/02

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
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1	1/25/03
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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